## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

10/510964

| Γ                                                                                    |                                                |                                                                    | SMALL ENTITY OTHER THAN |                                        |               |                  |                |                   |                        |      |                    |                        |  |
|--------------------------------------------------------------------------------------|------------------------------------------------|--------------------------------------------------------------------|-------------------------|----------------------------------------|---------------|------------------|----------------|-------------------|------------------------|------|--------------------|------------------------|--|
| Ŀ                                                                                    |                                                |                                                                    | (Colum                  | n 11                                   | (Column 2)    |                  |                | TYPE              |                        | OF   | SMALL              | ENTITY                 |  |
| TOTAL CLAIMS                                                                         |                                                |                                                                    | _                       |                                        |               |                  |                | RATE              | FEE                    | ]    | RATE               | FEE                    |  |
| ۶                                                                                    | OR                                             |                                                                    | NUMBER FILED            |                                        | NUMBER EXTRA  |                  |                | BASIC FE          | ε                      | _ 0= | BASIC FEE          | 150                    |  |
| 7                                                                                    | OTAL CHARGE                                    | EABLE CLAIMS                                                       | minus 20=               |                                        | . 2           |                  |                | XS 9=             |                        | OR   | X\$16=             |                        |  |
| IN                                                                                   | DEPENDENT (                                    | CLAIMS .                                                           | 13 "                    | iinus 3 =                              | · A           |                  |                | X43=              |                        | OR   | X86=               |                        |  |
| M                                                                                    | ULTIPLE DEPE                                   | ENDENT CLAIM F                                                     | PRESENT                 |                                        |               |                  |                | -145=             | ·                      | OR   | -290=              | 2 (-)                  |  |
| *If the difference in column 1 is less than zero, enter "0" in column 2              |                                                |                                                                    |                         |                                        |               |                  |                | TOTAL             | <del> </del>           | OR   | TOTAL              | 950                    |  |
| CLAIMS AS AMENDED - PART II                                                          |                                                |                                                                    |                         |                                        |               |                  |                | OTHER THAN        |                        |      |                    |                        |  |
|                                                                                      |                                                | (Column 1)                                                         |                         | (Column 2) (Column 3)                  |               |                  |                | SMALL             | ENTITY                 | OR   | SMALL              | ENTITY                 |  |
| AMENDMENT A                                                                          | A                                              | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                          |                         | HIGHE<br>NUMB<br>PREVIOU<br>PAID F     | ER<br>J\$LY   | PRESENT<br>EXTRA |                | RATE              | ADDI-<br>TIONAL<br>FEE |      | RATE               | ADDI-<br>TIONAL<br>FEE |  |
|                                                                                      | Total                                          | . 8                                                                | Minus                   | - 20                                   |               | = D              |                | X\$ 9=            | 1                      | OR   | XS18=              |                        |  |
| AME                                                                                  | Independent                                    | . 3                                                                | Minus                   | 3                                      |               | = 88             |                | X43=              |                        | OR   | X86=               |                        |  |
| _                                                                                    | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                                                    |                         |                                        |               |                  |                | +145=             |                        | OR   | +290=              |                        |  |
|                                                                                      |                                                | •                                                                  |                         |                                        |               |                  | L              | TOTAL             | /                      | OR   | TOTAL              |                        |  |
| -                                                                                    |                                                |                                                                    |                         | 10-l                                   | - 01          | (Column 3)       | A              | DOIT. FEE         | L                      | 19   | ADDIT. FEE         |                        |  |
| -                                                                                    |                                                | (Column 1)                                                         |                         | (Column<br>HIGHES                      |               | (Colonia 2)      |                |                   | ADDI-                  |      |                    | ADDI-                  |  |
| ENT B                                                                                |                                                | REMAINING<br>AFTER<br>AMENDMENT                                    | ·                       | NUMBE<br>PREVIOU<br>PAID FO            | ISLY j        | PRESENT<br>EXTRA |                | RATE              | TIONAL<br>FEE          |      | RATE               | TIONAL                 |  |
| 2                                                                                    | Total ·                                        | •                                                                  | Minus                   |                                        |               | <u> </u>         |                | XS 9=             |                        | OR   | X\$18=             |                        |  |
| AMENDMENT                                                                            | inaependent                                    | •                                                                  | Minus                   | ***                                    |               |                  |                | X43=              |                        | OR:  | X86=               |                        |  |
| ١                                                                                    | FIRST PRESE                                    | NTATION OF ML                                                      | ILTIPLE DEP             | ENDENT C                               | LAIM          | UI               | F              | +145=             |                        | OR   | +290=              |                        |  |
|                                                                                      |                                                | ••                                                                 | •                       |                                        |               |                  | <u>۔</u><br>ند | TOTAL             | •                      | OR , | TOTAL<br>DOIT, FEE |                        |  |
| (Column 1) (Column 2) (Column 3)                                                     |                                                |                                                                    |                         |                                        |               |                  |                |                   |                        |      |                    |                        |  |
| נ<br>פ<br>ע                                                                          |                                                | CLAIMS REMAINING AFTER AMENDMENT                                   |                         | HIGHES<br>NUMBE<br>PREVIOUS<br>PAID FO | T<br>A<br>SLY | PRESENT<br>EXTRA | ſ              | RATE              | ADDI-<br>TIONAL<br>FEE |      | RATE               | ADDI-<br>TIONAL<br>FEE |  |
| ⊊Г                                                                                   | Total                                          |                                                                    | Minus                   | +                                      |               | =                |                | X\$ 9=            |                        | OR   | X\$18=             |                        |  |
| 8 f                                                                                  | Independent                                    | •                                                                  | Minus                   | •••                                    |               | =                | 上              | X43=              |                        | ÓR   | X86=               |                        |  |
|                                                                                      | FIRST PRESE                                    | NTATION OF MU                                                      | LTIPLE DEP              | ENDENT C                               | LAIM          |                  | +              | . 145             |                        |      | +290=              |                        |  |
| * If the entry in column 1 is less than the entry in column 2 write "0" in column 3. |                                                |                                                                    |                         |                                        |               |                  |                |                   |                        |      |                    |                        |  |
| • 11                                                                                 | the entry in colum                             | nn 1 is less than the                                              | entry in colum          | nn 2. write "O                         | ' in calu     | mn 3.            | . ∟            |                   |                        | L    |                    |                        |  |
| II                                                                                   | the "Highest Nur                               | nn 1 is less than the<br>nber Previously Pai<br>nber Previously Pa | d For IN THIS           | SPACE is le                            | ss than       | 20, enter *20.*  | . ┗            | TOTAL<br>DIT, FEE |                        | . L  | TOTAL<br>ODIT. FEE |                        |  |